

(FOR USE WITH FORM PTO-875)

FILING DATE

APPLICANT(S)

*

TOTAL IND.		↓	8.	↓		↓
TOTAL DEP.		←	14	←		←
TOTAL CHARGES			12			

TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS